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APPLICANT(S) Wei-Min Zhang et al.
 TITLE: Error Correction Coding Across Multiple Channels in Content
Distribution Systems
 Appl. No. 10/087,202 Filed: March 1, 2002
 Fee (if any) \$846.00 Check Enclosed ☐ Yes ☒ No
 Certificate of Mailing:
☒ First Class ☐ Express Mail label no. _____
 Kindly stamp receipt date and mail to acknowledge receipt of the accompanying:
 1) Transmittal Form;
 2) Fee Transmittal;
 3) Response to the Notice of Missing Parts;
 4) Copy of the Notice of Missing Parts;
 5) Assignment (signed);
 6) Recordation Form PTO-1595;
 7) Declaration (signed);
 8) Supplemental Application Data Sheet;
 9) Statement Under 37 CFR 3.73(b) (signed);
 10) Power of Attorney (signed); and
 11) Postcard.
 Due Date: May 28, 2002 Date Mailed: May 28, 2002
 Atty/Secy KFC/ka File No.: 19927-001900US

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JUL 18 2002

PTO/SB/21 (08-00)

Please type a plus sign (+) inside this box → ☒

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/087,202
	Filing Date	March 1, 2002
	First Named Inventor	Zhang, Wei-Min
	Group Art Unit	2133
	Examiner Name	Unassigned
Total Number of Pages in This Submission	Attorney Docket Number	019927-001900US

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Copy of the Notice of Missing Parts. Recordation Form PTO-1595. Declaration (signed). Supplemental Application Data Sheet. Statement Under 37 CFR 3.73(b) (signed). Power of Attorney (signed). Postcard.
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm and Individual name	Townsend and Townsend and Crew LLP Ko-Fang Chang	Reg. No. 50,829
Signature	<i>Ko-Fang Chang</i>	
Date	5/28/02	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:		
		May 28, 2002
Typed or printed name	Kristina Alvarez	
Signature	<i>Kristina Alvarez</i>	Date 5/28/02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.
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Appr. for use through 10/31/2002. OMB 0651-0032
 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 846

Complete if Known

Application Number 10/087,202

Filing Date March 1, 2002

First Named Inventor Zhang, Wei-Min

Examiner Name Unassigned

Group Art Unit 2133

Attorney Docket No. 019927-001900US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number 20-1430

Deposit Account Name Townsend and Townsend and Crew LLP

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Credit any overpayments
☐ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	740	201	370	Utility filing fee	370
108	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	180	214	80	Provisional filing fee	

SUBTOTAL (1)

(\$370)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
41	20** = 21	X \$9 = \$189	
Independent Claims	4	3** = 1	X \$42 = \$42
Multiple Dependent	1	X \$140 = \$140	

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
103	18	203	9	Claims in excess of 20	
102	84	202	42	Independent claims in excess of 3	
104	280	204	140	Multiple dependent claim, if not paid	
109	84	209	42	** Reissue independent claims over original patent	
110	18	210	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2)

(\$371)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge - late filing fee or oath	65
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	620	217	480	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,860	228	930	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Sheet	
581	40	581	40	Recording each patent assignment per property (times number of properties)	40
148	740	248	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
189	900	189	900	Request for expedited examination of a design application	

Other fee (specify):

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$105)

SUBMITTED BY

Name (Print/Type)	Registration No. (Attorney/Agent)	Telephone
Ko-Feng Chang	50,828	650-326-2400
Signature	Date	
<i>Ko-Feng Chang</i>	5/28/02	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-3038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. PA 3225591 v1

I hereby certify that this correspondence, being deposited with the United States Postal Service as first class mail in an envelope addressed to:

PATENT
Attorney Docket No.: 019927-001900US

Assistant Commissioner for Patents
Attn: Box Missing Parts
Washington, D.C. 20231

On 5/28/02
TOWNSEND and TOWNSEND and CREW LLP

By: [Signature]

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

WEIMIN ZHANG et al.

Application No.: 10/087,202

Filed: March 1, 2002

For: ERROR CORRECTION CODING
ACROSS MULTIPLE
CHANNELS IN CONTENT
DISTRIBUTION SYSTEMS

Examiner: Unassigned

Art Unit: 2133

TRANSMITTAL LETTER -
RESPONSE TO NOTICE OF MISSING
PARTS

ATTN: BOX MISSING PARTS
Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Pursuant to the Notice to File Missing Parts of Nonprovisional Application, dated March 27, 2002, enclosed are the following to be made of record in the above-identified application:

- 1) Executed Declaration.
- 2) Power of Attorney.
- 3) Statement of Assignee Under 37 C.F.R. § 3.73(b).
- 4) Copy of Notice of Missing Parts.

Please charge Deposit Account No. 20-1430 for the following fees:

Small Entity:	(a) Filing Fee (§ 1.16(a)) (Small Entity)	\$370.00
	(b) Excess Claims Fees (§ 1.16(b), (c)):	
	41 - 20 = 21 x \$9.00 =	\$189.00
	4 - 3 = 1 x \$42.00 =	\$42.00
	Multiple Dependent Claim(s) Presented	\$140.00
	(c) Missing Parts Surcharge	\$65.00
	TOTAL FEES TO BE CHARGED	\$806.00

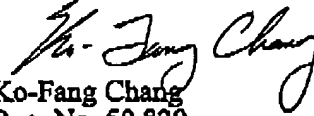
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WEIMIN ZHANG et al.
Application No.: 10/087,202
Page 2

PATENT

The Commissioner is hereby authorized to charge any additional fees associated with this paper or during the pendency of this application, or credit any overpayment, to Deposit Account No. 20-1430. This Transmittal Letter is submitted in duplicate.

Respectfully submitted,


Ko-Fang Chang
Reg. No. 50,829


Customer No. 20350

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, 8th Floor
San Francisco, California 94111-3834
Tel: 650-326-2400 / Fax: 415 576-0300
KC/ka

PA 3225548 v1

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Attorney Docket No. 019927-001900US

Form PTO-1595 (Rev. 03-01) OMB No. 0651-0027 (exp. 5/31/2002)		Recordation Form Cover Sheet PATENTS ONLY		U.S. Department of Commerce U.S. Patent and Trademark Office	
Tab settings ⇌ ⇌ ⇌					
To the Honorable Commissioner of Patents and Trademarks, Please record the attached original documents or copy thereof					
1. Name of conveying party(ies): <p style="text-align: center;">Wei-Min Zhang, Timothy A. Misko</p>			2. Name and address of receiving party(ies) Name: <u>BroadLogic Network Technologies, Inc.</u> Internal Address: <u>A California corporation</u> Street Address: <u>638 Gibraltar Court</u> City: <u>Milpitas</u> State: <u>California</u> ZIP: <u>95035</u> Additional names and addresses attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Additional name(s) of conveying parties attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. 3. Nature of conveyance: <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Security Agreement <input type="checkbox"/> Other: _____ </div> <div> <input type="checkbox"/> Merger <input type="checkbox"/> Change of Name </div> </div>			Execution Date: <u>May 14, 2002</u>		
4. Application number(s) or patent number(s). If this document is being filed together with a new application, the execution date of the application is: _____ <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> A. Patent Application No(s): <u>10/087,202</u> </div> <div style="width: 45%;"> B. Patent No(s): _____ </div> </div> Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Ko-Fang Chang</u> <u>TOWNSEND AND TOWNSEND AND CREW LLP</u> <u>Two Embarcadero Center, 8th Floor</u> <u>San Francisco, California 94111-3834</u> <u>(850) 326-2400</u>			6. Total number of applications and patents involved <u>1</u> 7. Total fee (37 CFR 3.41): _____ <u>\$40.00</u> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account </div> </div> 8. Deposit account number: <u>20-1430</u> (Attach duplicate copy of this page if paying by deposit account)		
DO NOT USE THIS SPACE					
9. Statement and signature. <i>To the best of my knowledge and belief, the foregoing is true and correct and any attached copy is a true of copy of the original document.</i>					
<u>Ko-Fang Chang</u> Name of Person Signing Atty. Reg. No. 50,829		 Signature		<u>5/28/02</u> Date	
Total number of pages including cover sheet, attachments and document <u>2</u>					

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PA12255(v)

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